

**COMBINED DECLARATION AND POWER OF ATTORNEY
FOR PATENT APPLICATION**

As below named inventors, we hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am an original, first and joint inventor of the subject matter which is claimed and for which a utility patent is sought on the invention entitled:

NOVEL PROTEINS AND NUCLEIC ACIDS ENCODING SAME

the specification of which is being filed herewith.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information that is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application designating at least one country other than the United States listed below and have also identified below any foreign application for patent or inventor's certificate or PCT International application having a filing date before that of the application on which priority is claimed.

Appln. Number	Country (if PCT, so indicate)	Filing Date (dd/mm/yy)	Priority Claimed	
			Yes	No

I hereby claim the benefit under Title 35, United States Code, § 119(e) or §120 of any United States application(s), or §365(c) of any PCT International application(s) designating the United States of America listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application:

Application No. (U.S.S.N.)	Filing Date (dd/mm/yy)	Status (Patented, Pending, Abandoned)
60/185,674	28/02/00	Abandoned
60/185,535	28/02/00	Abandoned
60/186,717	03/03/00	Abandoned
60/186,585	03/03/00	Abandoned
60/186,604	03/03/00	Abandoned
60/218,323	14/07/00	Pending
60/220,517	24/07/00	Pending

Application No. <i>(U.S.S.N.)</i>	Filing Date <i>(dd/mm/yy)</i>	Status <i>(Patented, Pending, Abandoned)</i>
60/186,584	03/03/00	Abandoned
60/186,827	03/03/00	Abandoned
60/260,020	05/01/01	Pending
60/186,716	03/03/00	Abandoned
60/218,435	14/07/00	Pending
60/186,715	03/03/00	Abandoned
60/223,897	09/07/00	Pending
60/264,849	26/01/01	Pending
60/186,719	03/03/00	Abandoned
60/259,031	28/12/00	Pending
60/215,855	03/07/00	Pending
09/795,271	27/02/01	Pending
09/809,476	15/03/01	Pending

PCT International Applications designating the United States:

PCT International Application No.	PCT Filing Date	Status

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

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Applicant(s): Gerlach et al.
Attorney Docket: 15966-694CIP2

all of MINTZ, LEVIN, COHN, FERRIS, GLOVSKY AND POPEO PC, as Applicant's attorneys with full power of substitution and revocation to take any and all action necessary with regard to the above-identified patent.

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or patent issued thereon.

Signature of Valerie Gerlach

Date

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Signature of John MacDougall

Date

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Parameter	Unit	Value	Standard Error	t-Statistic	p-Value
Intercept		1.0000	0.0000	1.0000	0.0000
Age	Years	0.0000	0.0000	0.0000	0.0000
Gender		0.0000	0.0000	0.0000	0.0000
Marital Status		0.0000	0.0000	0.0000	0.0000
Education	Years	0.0000	0.0000	0.0000	0.0000
Income	Thousands of Dollars	0.0000	0.0000	0.0000	0.0000
Health Insurance		0.0000	0.0000	0.0000	0.0000
Unemployment Insurance		0.0000	0.0000	0.0000	0.0000
Disability Insurance		0.0000	0.0000	0.0000	0.0000
Life Insurance		0.0000	0.0000	0.0000	0.0000
Retirement Savings		0.0000	0.0000	0.0000	0.0000
Charitable Contributions		0.0000	0.0000	0.0000	0.0000
Gifts		0.0000	0.0000	0.0000	0.0000
Estate Tax		0.0000	0.0000	0.0000	0.0000
Gift Tax		0.0000	0.0000	0.0000	0.0000
Capital Gains Tax		0.0000	0.0000	0.0000	0.0000
Dividend Tax		0.0000	0.0000	0.0000	0.0000
Interest Tax		0.0000	0.0000	0.0000	0.0000
Other Taxes		0.0000	0.0000	0.0000	0.0000
Adjusted R-Square		0.0000	0.0000	0.0000	0.0000
F-Statistic		0.0000	0.0000	0.0000	0.0000
Prob(F-Statistic)		0.0000	0.0000	0.0000	0.0000

Date _____

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